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Medical Services Insurances Enquiry



(1) Whereas the overall aims and the general design of the Medical Services Insurance Act are commendable, there appear to be the following weaknesses:

- (a) No provision whatsoever is made for the coverage of the purchase of drugs, dental work and optical accessories.
- (b) The financing of the plan is not on an equitable basis, geared to ability to pay.

(2) It is obvious that to certain families crippling expenses in connection with the purchase of drugs could easily accrue. Even middle income brackets could become seriously affected by unforeseen expenses of this nature. Expensive drugs may have to be purchased in connection with certain chronic conditions or sudden developments like German measles. I know of one case where a pregnant woman had to pay over \$40.00 at very short notice to buy gammaglobulin to prevent German measles from developing.

Low income individuals and especially families requiring antibiotics etc. to combat diseases find it either impossible or else financially crippling to purchase what often are life saving drugs, especially for their children. Sometimes doctors put such patients into the hospitals so that they may get free drugs under the Ontario Hospital Services Commission Act. This may lead to a shortage of hospital beds and, in the long run, cost more money than a drug insurance plan would cost.

A privately operated plan for drug insurance is not now available in the area around Cobalt, although I understand, it was implemented by druggists in other parts of the Province.

(3) Dental expenses are often quite high and completely outside the reach of the low income groups. In contrast with European policies, very few, if any, Canadian private carriers carry a dental rider in their policies, not even such otherwise comprehensive plans as "Medicall".

It is a fact that many school children suffer from toothaches which fact greatly interferes with their scholastic work and having check ^{ed} this matter with the local Public School Principal, according to his testimony, I find that this poses a grave problem and one of the main reasons for this state of affairs is the fact that many low income families simply cannot afford dental work. The most elementary and humanitarian considerations require therefore that at least school children should receive free dental care or else this item should be included in the proposed legislation. Similar arguments could be advanced regarding the work and services of optometrists.

(4) The premium to be charged by the private carriers, even though the government will impose a ceiling, will most probably be in the neighbourhood where present PSI or Medicall rates are or else the private carriers could not operate. This means that for doctors' bills alone the family rate for rich and poor alike will be around \$180 (present Medicall rate). If the government proceeds on the present basis which excludes dental work, drugs, etc., then these items will have to be financed in addition to (a) paying the premium for the Medical Services Insurance and (b) the premium for the Hospitalisation Insurance. A typical case would be a family of husband, wife and nine children. \$196 are paid to PSI and the Ontario Hospitalisation Commission per annum. In one year that family had to pay \$130 for 4 eye glasses, and as they can afford only the most urgently required dental work, about \$50 are spent on it annually. The majority of the children go without dental care, which the mother informs me, it is impossible to afford. Should some of the children take seriously ill and require expensive drugs, that item could easily run around \$100. In short, for the present insurance rates, and estimated \$100 for drugs and optical work per year and at least another \$100 for dental work, this family would have to raise some \$400. At one time the father made about \$3000, now he is in a somewhat higher income bracket, but still under \$4000. There are many families though that make even less than \$3000 a year. Is it just to charge them the

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same premium as the man who makes \$10,000 and over? Either the premium rates should be lowered across the board and the private carriers should receive subsidies from general tax revenues, or else the premium payments should be geared to income. In any case, the care of our health should merit the same consideration at least as other government financed projects such as schools, roads and parks which are financed by taxation on an equitable basis. To let our children suffer from toothaches, claiming there is no money for "free" dental care, while we spend huge sums on parks e.g. is not putting first things first and ought to be remedied at once by the government.

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Addendum by author:

Medical benefits should be available to subscribers no matter where he is - e.g.
en voyage par exemple.

Il ne peut pas estimer les coûts des services

- visites drogués.
médecin.
soins dentaires.

